1	2	3	4	5	6	7
4.	Meghalaya	580	19	2500	4310	131579
5.	Mizoram	380	26	970	2553	37307
6.	Nagaland	314	24	2171	6914	90458
7.	Sikkim	217	28	591	2723	21107
8.	Tripura	728	48	3491	4795	72729

Source: National Health Profile, 2008 published by Central Bureau of Health Intelligence

AIIMS-like institutes

2837. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of AIIMS-like institutes functioning at present and details of those coming up by end of 2012;

(b) the number of such institutes required to cater to the optimum needs of health services for the whole country, by the end of 2015;

(c) whether Government has drawn any plan in this regard; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (d) At present, the premier Central Government institutions such as AIIMS, New Delhi; Postgraduate Institute of Medical Education and Research (PGIMER), Chandigarh; Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER), Puducherry; and North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (NEIGRIHMS), Shillong are providing tertiary healthcare services.

In addition, under the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), six AIIMS-like institutions, one each in the States of Bihar (Patna), Chhattisgarh (Raipur), Madhya Pradesh (Bhopal), Orissa (Bhubaneshwar), Rajasthan (Jodhpur) and Uttarakhand (Rishikesh) are being set up in the first phase of PMSSY. It is also proposed to set up two more institutions, one each in the States of Uttar Pradesh and West Bengal in the second phase of PMSSY.

These institutions would cater to the needs of tertiary healthcare services for the country.

Neonatal mortality rate

2838. SHRI T.K. RANGARAJAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the data regarding neonatal mortality in the country for the last three years, State-wise;

(b) whether it is a fact that the mortality rate is stagnant since 2003;

(c) if so, the reasons for the situation; and

(d) the steps taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) The Neonatal Mortality Rate for the last three years for major States is given in Statement (*See* below).

(b) The Neonatal Mortality reduced from 37 per 1000 live births in 2004 to 36 per 1000 live births 2007.

(c) The reasons for the situation are primarily early marriage of women, frequent pregnancies, adolescent pregnancy, delay in recognition of illness, delay in accessing health facilities, inadequate nutrition, etc.

(d) The Reproductive and Child Health programme (RCH) II under the National Rural Health Mission (NRHM), comprehensively integrates interventions that improve child health and addresses factors contributing to morbidity and mortality.

The key components of child health care which help reduce child morbidity and mortality are as follows:

- Integrated management of neonatal and childhood Illnesses (IMNCI) and Pre-Service Integrated management of neonatal and childhood Illnesses (IMNCI)
- Facility Based Integrated management of neonatal and childhood Illnesses (IMNCI)
- Early detection and appropriate management of Diarrhoea disease
- Early detection and appropriate management of Acute Respiratory Infections and other infections
- Navjaat Shishu Suraksha Karyakram (NSSK), a programme for Basic newborn care and resuscitation
- Infant and young child feeding
- Immunization
- Vitamin A supplementation and Iron and Folic Acid supplementation.

Statement

Details of National Mortality Rates

Sl. No.	India/Major States	Neo-Natal Mortality Rates				
		2003	2004	2005	2006	2007
1	2	3	4	5	6	7
	INDIA	37	37	37	37	36
1.	Andhra Pradesh	36	36	35	33	33
2.	Assam	36	35	33	35	34
3.	Bihar	34	33	32	32	31

1	2	3	4	5	6	7
4.	Chhattisgarh	—	43	45	43	41
5.	Delhi	—	20	20	22	20
6.	Gujarat	35	37	36	38	37
7.	Haryana	31	31	35	34	34
8.	Himachal Pradesh	31	31	33	30	31
9.	Jammu and Kashmir	—	38	36	39	39
10.	Jharkhand	—	26	28	29	28
11.	Karnataka	31	25	28	28	26
12.	Kerala	7	9	11	10	7
13.	Madhya Pradesh	50	50	51	51	49
14.	Maharashtra	26	26	25	27	25
15.	Orissa	47	49	53	52	49
16.	Punjab	32	30	30	30	29
17.	Rajasthan	43	42	43	45	44
18.	Tamil Nadu	30	29	26	24	23
19.	Uttar Pradesh	48	50	45	46	48
20.	West Bengal	30	29	30	28	28

Rights of HIV/AIDS patients

2839. DR. E.M. SUDARSANA NATCHIAPPAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is proposing a comprehensive law to protect the rights of HIV/AIDS patients to get nondiscriminatory treatment in hospitals, schools, working places and public places; and

(b) if so, whether the medicines of internationally accepted standard and nutrient food will be part of the package of food and medicine for treatment of such patients?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) Yes. The draft of the Bill on HIV/AIDS is, at present, under finalization.

(b) All eligible HIV/AIDS patients are provided free ant-retroviral medicines of high quality under National AIDS Control Programme (Phase-III). Nutrient food is currently not provided under the programme.

Development plans for Central Institute of Psychiatry, Ranchi

2840. SHRIMATI RENUBALA PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: